Discharge Data History

– 1980 collection of 12 data elements

– 1982 collection of 15 -16 data elements

– 1984 transfer of functions to OSHPD

– 1986 creation of CHPDAC

– 1988 collection of 17-18 data elements

– 1994 mandated collection of 20-21 data elements, effective 1996

Discharge Data MIRCal

– 1998 mandate for online transmission of data beginning with 2001 Discharge Data reports

– reports to be approved or rejected within 15 days of receipt

– reports that do not meet the standards established by the Office shall not be accepted and shall be rejected

– a report shall be considered not filed as of the date that the facility is notified that the report is rejected

Core Elements of MIRCal Regulations

- Establish online reporting requirements
- No new Data Elements introduced
- Establish Report Periods and Due Dates for discharges on or after January 1, 2001
- Approve or reject reports within 15 days of receipt
- Reduce the number of extension days

Section walk through: Section 97045

- Article 3, Section 97045, Failure to File required Reports

- This section is being added to the Patient Discharge Data regulations as Section 97250, bringing the $100 a day penalty language into Article 8, making Article 8 more comprehensive

Section 97210 / Contact

- (a) Each hospital shall designate a contact person and shall notify the Discharge data Program in writing

- (b) 15 days to tell us if contact person details have changed

- (c) Unique facility identification number shall be used to submit data to the Office

- (d) May submit data directly or may designate an Agent; hospital always responsible for data compliance

Section 97211 / Due Dates

- (a) The prescribed report period is unchanged

- (b) The effective date for the start of a new report period following a change of licensee is unchanged

- (c) Establishes due dates of May 31, and July 31, 2002, for 2001 discharges

- (d) Establishes due dates 3 months after the end of a report period for 2002 and subsequent report periods

- (e) Updated subsection numbering, reference improved

Section 97212 / Definitions

- Obsolete language referring to non-online submission methods deleted from subsections (a),(d),(g) and (h)

- New definitions added for "Error", "MIRCal", "Reporting Facility", etc.

- HCFA name updated to CMS in (d) &(g)

- Subsections rearranged into alphabetical order

Section 97213 / Reporting

- Revisions to delete obsolete language referring to non-online methods of submission (b),(c),(d),(e),(f)

- Revisions to add references to the Format and Specifications for Online Transmission in Section 97215 (b)-(f)

- (h) formalizes an arrangement that has existed for many report periods, requires a request for a modification

Section 97214 / Form of Authentication

- Obsolete language, proposed for repeal

- Updated version of this language enables the transition to online reporting and is located in Section 97246, Data Transmission…

Section 97215 / Format

- Obsolete text referring to non-online formatting is proposed for repeal

- The updated Format and Specifications for Online Transmission are incorporated by reference and are available for download from the MIRCal website

- Also available from the Office in hardcopy

Sections 97216 - 97238

- Sections 97216 – 97238 contain the Data Element definitions

- No changes have been made to any of the Data Elements

Section 97239 / ID

This Section is obsolete and is proposed for repeal

Section 97240
Request for Modification

- This Section discusses requests to modify the data that is reported to the Office by a specific hospital

- There are no changes to this section

Section 97241 / Extensions

➢ (b) is designed to avoid the assessment of penalties for hospitals who submit a report within 7 days of a prescribed report period due date and who would find themselves in a penalty situation if their report is rejected after the due date

➢ Incremental reductions of extension days are proposed in subsections (c), (d) and (e)

➢ (f) prevents penalties due to MIRCal unavailability

Section 97242
Error Tolerance Levels

- Proposed for repeal

- Updated version of this section is 97248, Error Tolerance Level

Section 97243 / Acceptance Criteria

- Proposed for repeal

- Updated version of this section is 97247, Approval Criteria

Section 97244 / Submission

- Requires electronic submission of data for report periods occurring on or after January 1, 2001, using the MIRCal online transmission system

- Password protected access rights will be granted through a user agreement.

- Request an exemption to report outside of the MIRCal system

Section 97245 / Test Option

- Major paradigm shift: hospitals can use the test option to ensure that their data meets all approval criteria, before formally submitting data to the Office

- Intent of SB 1973 was to reduce the time between the collection and the availability of the data; the online test option is one means to achieving this important goal

Section 97246 / Transmittals

- Updated, redesigned forms and online screens collect information needed to process the data (e.g. report period dates, number of records) and are used to certify that the records are "true and correct"

- Use of the forms and screens represents one layer of security

Section 97247 / Approval

- This section can be used as a data readiness "checklist"

- Requirements stated in (a), (b), (c), (d), (e), and (f) are prerequisites to automated data processing which cannot proceed if any of the requirements are not met

- Office shall accept or reject each report within 15 days of receipt

Section 97248 / Error Tolerance Level

- The Error Tolerance Level shall be no more than 2% of records with errors, based on the total number of records in a report

- Records with one or more errors shall count as one error

- Default values will be assigned to invalid values on records that are below the 2% Error Tolerance Level

Section 97249 / Hours

- OSHPD analyst assistance will be available between 8:00am through 5:00pm, Monday through Friday, excluding Official State Holidays

- System maintenance will be performed outside of the stated supported hours unless an emergency situation requires more immediate attention; a telephone number is given to report potential problems

Section 97250 / Failure to File

- specifies that a $100 penalty will be assessed for each day that an approved report is not filed

- language from Article 3, proposed for inclusion in Article 8, Discharge Data Reporting Requirements

That's the walk through!

Questions?

Thank you